

PART B—ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addresses entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of issue fee or thereafter. **See reverse for Certificate of Mailing, below.**

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231.

DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

1. CORRESPONDENCE ADDRESS

ROBERT J. BARAN
ALLERGAN INC
2525 DUPONT DR
PO BOX 19534
IRVINE CA 92713-9534

12M2/0620
RECEIVED
PATENT OFFICE

JUL 28 1997

08

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and Zip Code

CO-INVENTOR'S NAME

Street Address

City, State and Zip Code

☐ Check if additional changes are enclosed

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/605,567	02/22/96	020	CEBULAK, M	1209 06/20/97
First Named Applicant	WOODWARD,	DAVID F.		

TITLE OF INVENTION NON-ACIDIC CYCLOPENTANE HEPTANOIC ACID, 2-CYCLOALKYL OR ARYLALKYL DERIVATIVES AS THERAPEUTIC AGENTS

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1	16955DIV2CIP	514-357.000	042	UTILITY	NO	\$1290.00 09/22/97

3. Correspondence address change (Complete only if there is a change)

Robert J. Baran (T2-2E)
Allergan, Inc.
2525 Dupont Drive
Irvine, CA 92612-1531

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 Robert J. Baran
2 Martin A. Voet
3 Howard R. Lambert

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT. (print or type)

(1) NAME OF ASSIGNEE:

Allergan

(2) ADDRESS: (CITY & STATE OR COUNTRY)

Waco, Texas 76712

A. ☐ This application is NOT assigned.

☒ Assignment previously submitted to the Patent and Trademark Office.

☐ Assignment is being submitted under separate cover. Assignment should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

6a. The following fees are enclosed:

☐ Issue Fee ☐ Advance Order - # of Copies _____

6b. The following fees should be charged to:

DEPOSIT ACCOUNT NUMBER 01-0885

(ENCLOSE A COPY OF THIS FORM)

☒ Issue Fee ☒ Advance Order - # of Copies 10

☒ Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

R. Baran

(Date)

7/24/97

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

Certificate of Mailing

Note: If this certificate of mailing is used, it can be used to transmit the Issue Fee. This certificate cannot be used for any other accompanying papers.

Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in

an envelope addressed to: **Box ISSUE FEE**
Assistant Commissioner for Patents
Washington, D.C. 20231

on: 7/24/97 (Date)

Bonnie Ferguson

(Name of person making deposit)

Bonnie Ferguson
7/24/97

(Signature)

(Date)

09/05/1997 LBERGER 00000103 DAN:010885 08605567
01 FC:142 1290.00 CH
02 FC:561 30.00 CH

1. TRANSMIT THIS FORM WITH FEE